



AGING HORIZONS



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Aging Perspectives

by Charlie Rehbein

As we all know, Montana has one of the fastest growing 65 and older populations in the nation. This increased aging trend is expected to continue for the next 18 years. The Baby Boom generation began to turn 65 in 2011, and approximately 35 Boomers in Montana turn 65 every day and will continue to do so until 2031, based on the 2010 US Census information provided by the Department of Commerce's Census and Economic Information Center. And it needs to be noted that within the 65 and older age group, the fastest growing segment is the 100 and older age group.

Planning for our future as an aging society will become more challenging over the next several years. Questions we have been asking and need to answer in the next few years as Montana ages are: can we keep the elderly, especially those in our most rural areas of the state, in their homes or at least in their home communities? If we can't keep them in their home communities, where do they go and what impact will that have on them, their family, friends and their home town? And what will be the impact to the city or town they may end up having to move to if they can't stay in their home community as they age?

One thing we do know, healthy life styles can make a difference in one's life and it is not too late to make changes. This year's Governor's Conference on Aging, which was held May 1st and 2nd in Helena at the Red Lion Colonial Inn, selected it's theme to be Aging in Good Health: Mind, Body and Spirit. Highlights of the conference are included in this newsletter. For more information regarding aging, go to our website at <http://www.dphhs.mt.gov/sltc>

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This issue of Aging Horizons is the maiden voyage of going paperless. In the past, we have sent the newsletter by e-mail, posted it on our webpage and sent it out by the US Mail. Please let us know what you think about this paperless newsletter and also let us know if there are topics you would like us to consider as we prepare future Aging Horizons Newsletters by sending your comments to: [crehbein@mt.gov](mailto:crehbein@mt.gov).

## 44<sup>th</sup> Governors Conference on Aging

### Aging in Good Health: Mind, Body and Spirit



The 44<sup>th</sup> Annual Governor's Conference on Aging was held May 1 and May 2, 2012 in Helena at the Red Lion Colonial Inn.

The conference explored issues related to aging using a holistic approach covering a myriad of ways aging impacts Montana families.

The opening session covered The State of Aging from a national, state and local prospective.

**National Prospective:** Percy Devine, Regional Administrator for the newly formed Administration for Community Living (formally the Administration on Aging), discussed aging from the national level. He discussed the focus of the new Administration for Community Living which covers all Americans - including people with disabilities and seniors – who should be able to live at home with the supports they need, participating in communities that value their contributions. To help meet these needs, the US Department of Health and Human Services has created this new organization, the Administration for



Community Living (ACL) with the goal of increasing access to community supports and full participation, while focusing attention and resources on the unique needs of older Americans and people with disabilities.



The ACL will include the efforts and achievements of the Administration on Aging, the Office on Disability and the Administration on Developmental Disabilities in a single agency, with enhanced policy and program support for both cross-cutting initiatives and efforts focused on the unique needs of individual groups such as children with developmental disabilities, adults with physical disabilities, or seniors, including seniors with Alzheimer's.

**State Prospective:** Anna Whiting Sorrell, Director of Montana's Department of Public Health and Human Services provided the state overview. She discussed aging from a more personal level.

Our vision for older Montanans is embodied in the Older Americans Act and Montana's Older Americans Act and is based on the American value that dignity is inherent to all individuals in our society, and the belief that older people should have the opportunity to

fully participate in all aspects of society and community life, be able to maintain their health and independence, and remain in their own homes and communities for as long as possible.

Montana has one of the fastest growing elderly populations in the nation. We are 14<sup>th</sup> in the nation with 14.8% of our citizens over 65. Amazingly, 7,215 Montanans are over age of 90. And she noted that later this month, her Aunt Gladys, is turning 90 and is the oldest of the McDonald clan on the Flathead Reservation.



She talked about the Aging services provided by the Department of Public Health and Human Services (DPHHS) and the dedicated state employees that come to work every day working for: Healthy People...Healthy Communities all across the State.

The Governor, during his tenure has made rebalancing the system by moving people from nursing homes to community based services a focus as he knows that all of us want to be at home with our families; in our homes, where our kids grew up, our grandchildren play....maybe even where we cared for our parents.

During the legislative session when DPHHS management of the Montana's Veterans Home in Columbia Falls came under attack, we fought back because our VETERANS deserve the best. The promise this country made to them when they fought for the freedom we enjoy every day will not be unraveled under my watch.

We are also in the process of establishing 6 Aging and Disability Resources Centers to serve as single points of contact for consumers accessing services.



She stated that she was “proud of our Lifespan Respite Summit which brought together 75 participants to begin planning on how to develop and implement lifespan respite programs in collaboration with our many partners.”

She concluded by saying, “But for me, as I look at into the audience, I just believe in my heart that all of this, while important, does not compare to what all of you bring. As elders, each of you as leaders in your family or community or for this state and country have built who we are and who we will become. I know that I am guided by a set of principles that our future is tied to our past.”

**Local Prospective:** Karin Roehm, Director of the North Central Area Agency on Aging, talked about Agencies on Aging being established by the Older Americans Act of 1965, which developed federal, state, and local structures to administer programs to help the elderly maintain their health and independence in their own homes and in their own communities.

Older Americans Act programs are available throughout all Montana counties and reservations and the Agencies on Aging are the local contact for aging services. She reminded us that Older Americans Act programs are available to anyone sixty years of age or older and to their spouse regardless of their age.

The primary focus of the 10 Area Agencies on Aging in the State of Montana is to provide supportive services to our older Montanans so they can age with dignity, remain in their local communities, and avoid premature and more costly institutional care such as entering a nursing home or repeated trips to the hospital. These services protect our elders in a cost effective manner, saving taxpayer dollars, and helping older Montanans to live independently as long as possible.



For fiscal year 2011, there were over 53,100 unduplicated people served by Area Agencies on Aging, which is 25% of Montana's older population. Some of the major services provided by the Area Agencies on Aging through their County Councils on Aging, their contractors, and the 167 Senior Centers in the state for the first 9 months of this fiscal year were: In-home services which have been provided to more than 1,600 clients for more than 13,800 hours of service including assistance with eating, bathing, dressing, walking, preparing meals, money management, housework, yard work, and medically-oriented care for acute or chronic illness; transportation services of almost 186,000 rides were provided to over 2,000 clients; more than 515,500 home delivered meals were delivered to more than 6,100 clients; more than 886,000 meals were served at meal sites like senior centers to more than 20,000 clients; more than 16,700 health screenings and health promotion activities were provided for almost 1,700 clients; more than 12,400 hours of Respite Care – which is providing a period of rest and relief to the caregiver of an older person - were provided for more than 200 caregivers; and numerous other types of assistance and education were provided to the elderly, their families and friends.

Some of the issues which make it difficult for Agencies on Aging to continue to provide these much needed services is flat or decreasing funding when the need is constantly increasing. The last three legislatures appropriated \$1.5 million in one-time-only funding per year for Aging programs which needs to become part of the base budget for our Agencies on Aging as the one-time-only funds have been used for regular, ongoing services.

The current funding has helped the Agencies on Aging to maintain existing services, but they have not been able to expand their community-based services to seniors. It will not be possible to maintain the current services with the ever-increasing number of elderly and flat funding or decreased funding. The programs provided by Agencies on Aging are a partnership, with participants paying what they can toward the services they receive and the state, federal, and local governments sharing in the responsibility. There is strong support at the Area Agency level that some amount of additional funding should be allotted to address increased inflationary costs, and to adjust for the increase in the number of older Montanans being served. An adequate level of consistent state

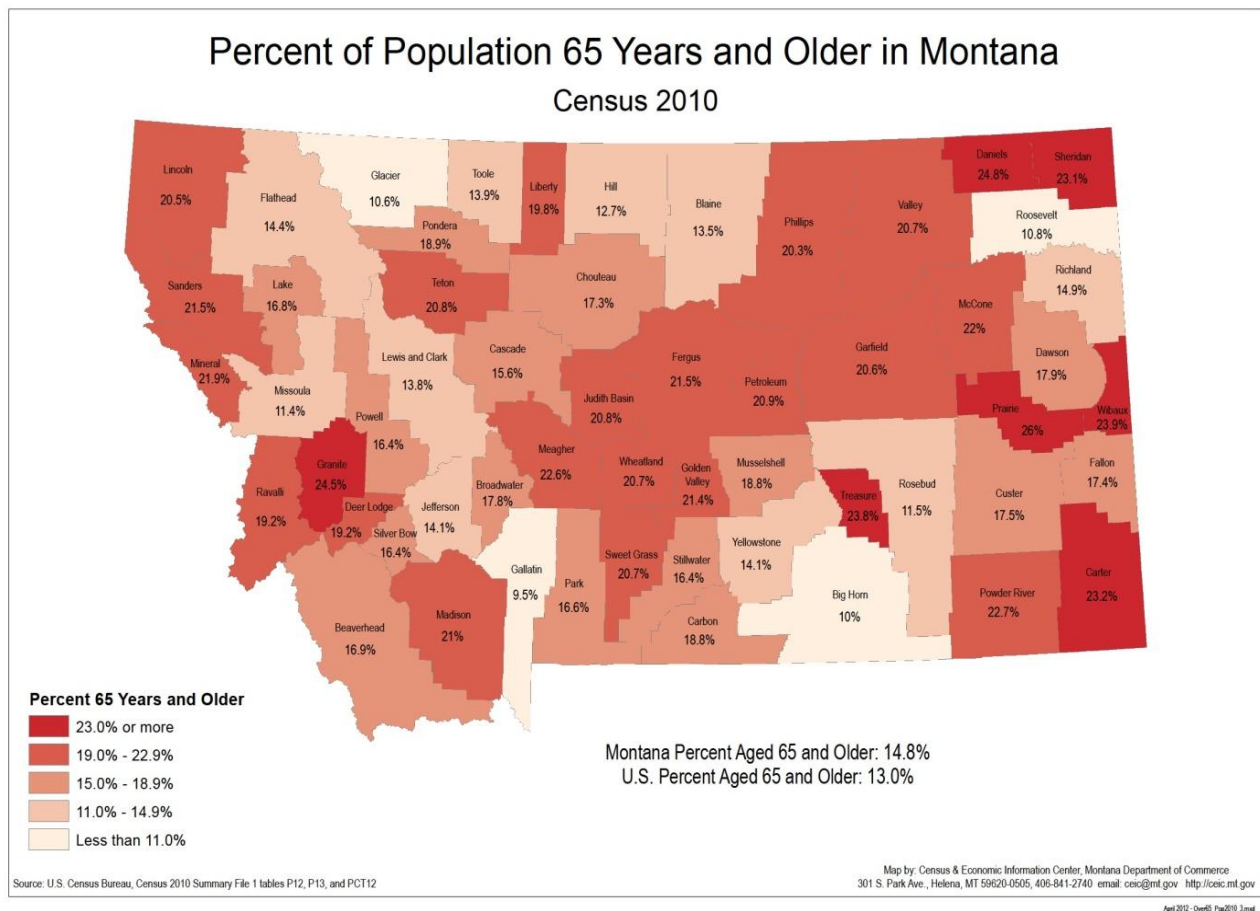


funding is very important to maintaining the cost-effective and preventative services provided by our Agencies on Aging.

There is also an Older Montanans Trust Fund in the State of Montana which was originally intended to plan for and support the needs of Montana's increasing aging population. When the legislature thought revenues were short in the 2011 session, they utilized dollars from the trust, nearly depleting the Older Montanan's Trust Fund. There is a belief by many senior advocates that these funds should be restored to the Trust to be available in the future to address the growing needs of our aging population. The trust fund also needs to have a sustainable source of ongoing revenue in order to have adequate resources for our future aging population.

### Aging Demographic:

Older Montanans need our services, especially in light of the Silver Tsunami of Aging our state is facing.



The 2010 census shows that there are over 209,685 Montanans over the age of 60 with the fastest growing segment of the population being those that are 85 or older. **By the year 2025 Montana will have the fifth highest per capita older population in the United States.** In 2010, the population age 60 and older reached 20% or more in most counties. By the year 2025, 30 percent of the population in nearly three quarters of Montana's counties will be over age 60. In 12 counties, the number of elders will exceed 40 percent of the total population.

## Calling all Caregivers...

The Montana Department of Public Health and Human Services (DPHHS), in collaboration with the Montana Lifespan Respite Coalition and the Montana's Aging &



Disability Resource Center (ADRC) network are working to build the infrastructure for a sustainable Lifespan Respite program that will make respite services in Montana more accessible for all caregivers.

Respite care provides temporary relief for family members that have the full-time task of caring for their aging or disabled loved ones with special needs. In Montana, there are over 110,000 people who find themselves in this position and 88% of them never get a break.

We need your input to help build and implement this program. During the Governor's Conference on Aging, we facilitated two focus group meetings to gather input and information from caregivers that cover the entire life spectrum caring for infants, children, young adults and elderly that need assistance to be able to live in their homes with family.



As Montanan ages, there will be an increased need to develop and provide respite care. If you are interested in being part of the Coalition or one of the work groups please contact us. For more information please contact:

Kerrie Reidelbach in Helena at 444-0998 or 1-800-332-2272  
Vicki Clear in Miles City at 1-800-224-6034

## MONTANA 2012 CENTENARIANS

The 2010 US Census indicated that Montana has 175 citizens 100 years of age or older. Over the past several years, the Governor's Advisory Council on Aging has honored our Centenarians by hosting the Centenarian Luncheon during the Annual Governor's Conference on Aging. This year, ten of Montana's Centenarians were able



to attend the conference and were honored at the Centenarian Luncheon during this year's Conference.

*Pictured on the left is Frances Elvira (Fannie) Wilson Leding, age 102, who was the oldest of the ten Centenarian, who attended and was honored at this year's conference.*

The following is an Alphabetical listing of Centenarians by first name who were recognized this year as being 100 years of age this year or older.

Adeline Johnson, Alberta Haltom, Alberta Haltom, Aline Dassonville, Ann McCarthy,  
Anna Pfeifer, Anne C Sullivan, Beatrice Brooks, Bernard Myers, Christina Vries,  
Dave Garber, Donald Eyre , Doris McCulloch, Eleanore Russ, Elsie Knostman,  
Elsie Kristman, Emma Blazievich, Ernie Stomsvik, Ethel Cubrda, Frances Bly,  
Frances Elvira (Fannie) Wilson Leding, Geneva Larson, Georgie Faye Burnett Donley,  
Harry L. Buchanan, Helen Barr, Helen Edmunds, Hilda Braun,, Hildegard Gappa,  
Irene Daley, Irma McLuskie, James W Eichhorn, Jessie Potts, Joe B. Donley,  
Joe Dobrowski, John Balazic, Josephine Woods, Kathryn (Mary) Sprunger Shelley,  
Kathryn Nellans, Leaphy Peck, Lee Cornelius, Leon Shelton, Leona L. Ricks,  
Lillian Franklin, Lillian Henault Bullshoe, Lottie Smart, Mabel Fisher, Mabel Laurence,  
Mable D McKillop , Madeline M. Roeseler, Marceline Carmack, Margaret Ping,  
Marie Cole, Marie Gambill, Marion Peterson, Marjorie J Saxby, Martha McGuire,  
Mary "Dena" Raush , Mary (Zaversnik) Favero, Mary Denton, Mary Ereaux Kuntz,  
Mary Hayes, Mary Libbey, Mary Urick Patton, Merna Olson, Meurice Doran,  
Mildred Eyre, Mildred Skeen, Minnie Kittelson, Mollie Moorman, Monica Barbara Kuntz,  
Ouida Steward, Philip Nelson, Rose Cooper, Rose Nagengast, Rose Nei,  
Shirley Easton Voyta, Uva Jackson Bardon, Vivian C. Frederick, Vivian Larson

If you or someone you know is 100 years of age or older this year, please contact the Office on Aging by calling the Citizen's Advocate number 1-800-332-2272 or e-mailing Brian LaMoure at [blamoure@mt.gov](mailto:blamoure@mt.gov) so we can recognize you or them as one of Montana's Centenarians.



**We are public health.**  
**We work to prevent fall injuries in older adults.**

Falls are the leading cause of injury and death in adults over 65 [1](#), but the good news is that with education and support, older adults can reduce their risk of debilitating falls.

In 2010, the Montana Department of Public Health and Human Services (MT DPHHS) was looking for a fall prevention program for older adults that it could pilot test in a few Montana communities. After looking at a variety of effective programs, Bobbi Perkins, Injury Prevention Coordinator for MT DPHHS, and her team chose a program called Stepping On.

Stepping On is a program designed to address the risk factors that can cause falls in older adults. These factors include lack of regular exercise, vision changes, and the presence of fall hazards in the home. Participants attend for seven weeks. During the two-hour sessions, participants learn exercises that help them gain strength and balance. They also learn about how they can monitor their home environment to reduce the likelihood of falls. Keeping floors clutter-free, making sure that light fixtures are working properly, and having a chair available when getting dressed are just some of the safety tips participants learn while in the program.

Data taken from the first three pilot sites in Great Falls, Lewiston, and Missoula show that the program is effective in reducing falls. Participants who completed the course and a six month follow-up questionnaire reported a 77 percent decrease in falls that caused them to go to the doctor. Participants also reported having less fear of falling. So far, the most powerful effect of the program has been shown to occur while participants are attending weekly sessions. The Montana Injury Prevention Program is now looking for ways to structure the program so that its effects are long-term and far-reaching.



Response from participants has been enthusiastic. Participant Joan Oleyar, 84, said she learned how to use her cane without it tripping or straining her. "I've learned so much about safety," she said. "I hate to see the class end because I think there is more we can learn."

Communities who currently have the program are looking for ways to continue the program when MT DPPHS sponsorship rotates to new communities. (MT DPHHS has recently introduced the program in Whitefish and Kalispell.) About the future of the program, Bobbi Perkins says, "We are committed to expanding Stepping On to more communities in Montana and are currently exploring possibilities for funding more programs. This program has been well received in Montana and is making a positive difference in the lives of the participants."

If you want more information please contact Bobbi Perkins at 406.444.4126 or [bperkins@mt.gov](mailto:bperkins@mt.gov).

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Fire Safety for Older Adults



The facts speak for themselves: the relative risk of Americans over the age of 65 dying in a fire is 2.6 times greater than that of the general population. The risk worsens as age increases. People age 85 and older die in fires at a rate 4.4 times higher than the rest of the population.

The leading cause of fire deaths in older adults is smoking and the leading cause of fire injuries in older adults is cooking.

There are a number of precautionary steps older Americans can take to dramatically reduce their chances of becoming a fire casualty, including:

- Don't leave smoking materials unattended and never smoke in bed.
- Never leave cooking unattended. Use a timer to remind you that you are cooking.
- Keep anything that can burn at least three feet away from heat sources, like portable space heaters, wood burning stoves, and fireplaces.
- Place a smoke alarm on every level of your home, including the basement, and both inside and outside bedrooms.
- Know at least two exits from every room. Make sure all doors and windows that lead outside open easily.

VITAMIN D AND CALCIUM FOR SENIORS

Minkie Medora, RD

Nutrition news is abundant in the media every day. Recently, two important nutrients have received a lot of attention. These are calcium and Vitamin D and the unique synergy between them. The knowledge about the need for calcium as well as sources of calcium is well known. Now there is increased attention to the benefits of combining intakes of calcium and Vitamin D, so that one can maximize the actions of the other in the body. A lot more research has been done recently on the need for Vitamin D and its benefits, not just for bone health but for other possible benefits.



Studies are now showing that there may be additional benefits of Vitamin D besides bone health. Some of these possible benefits are in reducing risk of certain cancers, cardiovascular disease, Type 2 Diabetes and cognitive function. Vitamin D continues to play an important role in calcium absorption by increasing the amount of calcium going into bone cells, and reducing fracture risk in seniors.

Maximizing calcium absorption into bones is critical. Reduced calcium deposits cause osteoporosis, a condition in which the body removes calcium from bones to use for other functions. When this loss continues, bones become brittle and break easily. For seniors who have poor balance, falls are more likely. We should also recognize that many seniors don't have osteoporosis, but suffer from low bone mass and are starting to lose calcium.

Increasing Aging Population: Life expectancy in the US has increased from 47 years in 1900 to 76 years 1990. Since 1900, the US population has tripled, but the number of adults 65 and older increased 11 fold, from 3.1 million in 1900 to 33.9 million currently. By 2030 the number of older Americans is expected to go to 70 million.

It is therefore critical that as our senior population increases, we pay special attention to changing body needs. Aging can bring about loss of lean muscle tissue and bone mass. At the same time, body fat increases if calorie intake and physical activity are reduced. Diet and the use of foods that provide the best possible nutrient needs make a difference in how the changing needs in the body are met.

The latest thinking on calcium and Vitamin D. To understand new findings on Vitamin D intakes, the US Institute of Medicine (IOM) was asked by the government to look at the recent information and make recommendations for what would be the best levels for people of all ages. Therefore, IOM reviewed Dietary Guidelines for Americans (DGAs) for both calcium and Vitamin D. The current recommendations for calcium are the same

– 1,200 mg/day for people 51 and older. Vitamin D requirements have now been increased to 600 IU/Day for people 60 and older, and 800 IU/day for those over age 70. There are Upper Level Intakes for both nutrients that go higher than the RDAs, but it is not necessary to try and reach these levels.

Getting calcium and Vitamin D in senior menus: The senior meals should provide one-third of the daily requirements for all nutrients. We also need to keep in mind that many seniors may not be getting the remaining two-thirds of these nutrients on their own, so making sure your meal covers one third of the requirements is essential. There are several options for including the two nutrients

Foods that are good sources of calcium include *fortified* dairy products such as milk, yogurt, ice-cream, and milk substitutes. Other good sources of calcium are spinach, soybeans, white beans, canned sardines and salmon with bones that are softened in the canning process. For those who cannot tolerate milk, there are fortified milk substitutes like soy milk and rice milk, as well as fortified lactose-free milk.



Foods that are good sources of Vitamin D include dairy products that are *fortified* with the vitamin – such as most milk products, yogurts and fortified orange juice. Fatty fish like salmon and sardines are very good sources also. So both calcium and Vitamin D can be found in the same foods.

The challenge of getting enough Vitamin D. In addition to the food sources, Vitamin D is made under skin from exposure to sunlight. For seniors, this is not something they can depend on. The ability to make Vitamin D in the body decreases as people get older. In addition, our Montana weather has too many days without the sun, and the winters keep people largely indoors. Even in summer, when there is more sun, seniors need to be careful about using sun-screen and not staying out too long. So, the combination of lack of sun light and concern about risk of skin cancer makes it very difficult for seniors to get sunlight to produce Vitamin D in the body. People who are obese or have dark skin also do not produce enough Vitamin D in the body.

Meeting the new Vitamin D requirement and the use of supplements. The decision to take supplements depends on how much seniors get from their diets. If seniors are not sure they are getting enough Vitamin D from food, supplements are a good option to enhance what is in the diet. Most calcium supplements also have Vitamin D combined. If seniors are taking multivitamins, they should check the label to make sure it has both nutrients. Many of the daily multivitamins and calcium supplements have 400 ug Vitamin

D added – which is at least half of the daily requirement. Vitamin D supplements are also available for those trying to reach the 800 ug level.

Finally – the benefits of physical activity must not be overlooked. Senior meal programs should encourage and offer opportunities for seniors to exercise and do other physical activity to strengthen bones and improve overall balance, as well as develop lean muscle mass.

Vitamin D: Top 10 food sources in standard food portions

Food	Standard Portion Size	Vitamin D in standard portion (ug)
Salmon, Sockeye, cooked	3 ounces	19.8
Salmon, smoked	3 ounces	14.5
Salmon, canned	3 ounces	11.6
Tuna, light, canned in oil, drained	3 ounces	5.7
Sardine, canned in oil, drained	3 ounces	4.1
Tuna, light, canned in water, drained	3 ounces	3.8
Whole milk – fortified with Vitamin D	1 cup	3.2
Whole chocolate milk, fortified - Vitamin D	1 cup	3.2
Milk, (nonfat, 1%, 2%, fortified – Vitamin D	1 cup	2.9
Soymilk, fortified with Vitamin D	1 cup	2.7

Calcium: Top 10 food sources in standard food portions

Food	Standard Portion Size	Calcium in standard portion (mg)
Fortified ready-to-eat cereals (various)	$\frac{3}{4}$ - 1 cup	250-1000
Orange juice, Calcium fortified	1 cup	500
Plain yogurt fortified	1 cup	452
Pasteurized processed Swiss cheese	2 ounces	438
Tofu, raw, regular prepared with calcium sulfate	$\frac{1}{2}$ cup	434
Ricotta cheese, part skim	$\frac{1}{2}$ cup	337
Swiss cheese	1.5 ounces	336
Mozzarella cheese, part skim	1.5 ounces	311
Low-fat milk (1)	1 cup	305
Soymilk, original & vanilla, fortified- Ca	1 cup	299

Easy Salmon Sticks

Makes 8 servings

Ingredients:

1 can (14.75 oz) drained pink salmon

1.2 C crushed low-sodium saltine crackers (about 16 crackers)

1 egg

Dash of seasonings like basil, oregano, garlic powder

1 Tablespoon vegetable oil

Non-stick cooking spray



Directions:

1. In a large mixing bowl, combine salmon, cracker crumbs, egg and seasonings.
2. Divide mixture into 8 balls and shape into sticks about 4" long.
3. Lightly coat a skillet with cooking spray. Add oil and preheat skillet. Medium heat for 1 – 2 minutes. Add fish sticks and cook for 3 minutes.
4. Flip over and cook about 3 mints or until golden brown.



Energy Share of Montana – Here to Help

Now's the time of year when you may have struggled all winter to pay your heat and light bills, but you find yourself falling further and further behind.

If you or someone you know are facing a termination notice with your energy provider, please call Energy Share at 1-888-779-7589 to see if we can help you out.

Can You Name these AGING Guys?



The Legal Service Developer Legal Document Clinics

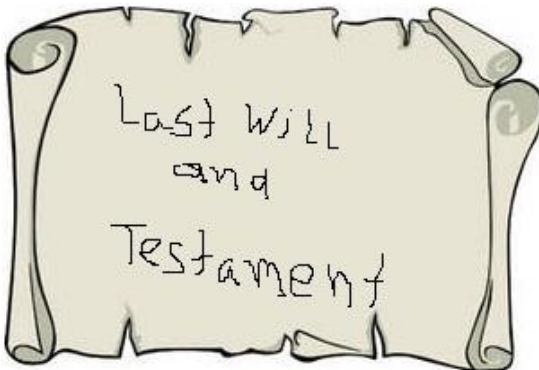


The Legal Service Developer Program (The Program) has confirmed the following Legal Document Clinics (Clinics) for 2012: **April** – Glasgow; **May** - Helena; **June** – Great Falls; **July** – Conrad; **August** – Missoula; **September** – Sanders County; and **October** – Glendive & Miles City.

The Program will recruit attorneys & paralegals in volunteering their time to assist up to fifty participants for the larger clinics and eight to ten participants for the smaller clinics.

Attorneys and paralegals will assist participants with the following documents: Beneficiary Deed; Affidavit of Death; Revocation of Beneficiary Deed; PoA – Durable forms; Declaration of Living Will Appointment; Declaration of Living Will; Revocation of Declaration of Living Will; Declaration of Homestead; Simple Will.

In 2011 the Program completed five Clinics in Kalispell, Havre, Ronan, Butte and Billings. A total of 224 participants completed 864 documents. The program could not have succeeded without the commitment of legal volunteers consisting of 24 attorneys; 18 paralegals; and 20 volunteers. The program recognizes the continued support from



the Area Agencies on Aging, County Councils on Aging and Senior Centers. With their support the program's success has been critical in assisting people across Montana whose lives have been changed by educating people on the importance of completing legal documents which not only effect their lives but the lives of their adult children.

We are looking forward to another successful year by helping people create a legal healthy lifestyle. For more information on a clinic in your area, please contact your local Area Agency on Aging at 1-800-551-3191.

Answer to “Can You Name these AGING Guys” on page 13.

On the left is **Duane Lutke**, Director Area VI Agency on Aging in Polson. In the center is **Hank Hudson**, who was the 2nd Governor's Coordinator on Aging serving under the Stephens administration and is currently the Economic Security Services Branch manager in the Department of Public Health and Human Services. On the right is **Brian LaMoure** with the Office on Aging in the Senior and Long Term Care Division.

Are You Still a Safe Driver?



According to the National Safety Council, car accidents are the leading cause of death for people ages 50 to 72. Next to teen drivers, drivers age 80 and older have higher crash death rates than any other group. A decline in vision or hearing, diminished strength or coordination, or decreased reaction time all increase the risk of being in an accident. What's more, certain

medications commonly taken by older adults may also impair their ability to drive safely.

In fact, many of us will outlive our ability to drive safely. This means that at some point in your life you, too, may have to stop driving—for your own safety and for others'. The following questions can help you assess whether your driving is a safety concern:

- Do you react slowly to traffic signals and the actions of other drivers?
- Do you find yourself inadvertently drifting into other lanes?
- Do you become lost or disoriented in once-familiar areas?
- Have you received tickets for moving violations?
- Have you caused any accidents?



Although lifelong driving may not be possible for all of us, giving up our car keys doesn't mean surrendering independence or mobility. If it's time for you to stop driving, contact your local Senior Center or Area Agency on Aging to find out about alternative transportation options. [The Eldercare Locator](#) will help you to find the Area Agency on Aging nearest to you.

For more information on safe driving, please visit:

Transportation Options for Older Americans: Choices for Mobility Independence

http://eldercare.gov/ELDERCARE.NET/Public/Resources/Brochures/docs/Trans_Options_Panels.pdf

National Center on Senior Transportation (NCST)

<http://www.seniortransportation.net> 

AAA Foundation for Traffic Safety

<http://www.seniordrivers.org>



MINI GRANT AWARDED

The Governors Advisory Council on Aging was pleased to announce the 2012 recipients of the



Mini Grant awards. The purpose of the Mini Grant Program is to help facilitate up front funding of innovative ideas that will serve senior interests in local communities. The Mini Grants range from \$500 to \$1,000. Activities eligible for funding included a full range of services needed by Montana's seniors such as training and education, development of support services, creating or enhancing on-going services to meet a specific or unmet need of seniors in the community. Applicants also have

to show collaboration with the aging network, and public/private sector partnerships.

The following 2012 applicants were selected for funding.

Requestor	Project	Amount
Sun River	Medical Equipment Storage	\$1,000
Hot Springs	Roof Repair	\$1,000
Rapelje Senior Center	Air Conditioner	\$1,000
	Total	\$3,000

All of the Mini Grant monies are procured by Council members from organizations and businesses. Conference attendees contribute by purchasing raffle tickets for items donated by the Council. Since 2006 grants totaling more than \$25,000.00 have been awarded to 32 rural communities around the state.



On behalf of the Advisory Council on Aging I would like to thank the grants judging panel and the sponsors' of the Mini Grant awards: The National Committee to Preserve Social Security and Medicare who has donated to this program since 1995 and the Crowley Fleck law firm. Also, since 2006, Alice Huller has donated 25 crocheted Afghans to the raffle.

At the Governor's Conference on Aging during the Montana Area Agencies on Aging (M4A) luncheon on May 2nd, several individuals were recognized and honored for their roles as advocates for Montana's elderly.

Senator Carol Williams, (on the far left) was recognized for her support of aging services, home and community based services, her work on the getting the Big Sky Rx program funded and the establishment of the Older Montanans Trust Fund.



Area Agency on Aging Directors, Lori Brengle – Area I in Glendive, Karen Erdie – Area II in Roundup, Duane Lutke – Area VI in Polson, Evelyn Havskjold – Area X in Havre, Jim Atkinson (who is recently retired and pictured in center) – Area IX in Kalispell, and Susan Kohler – Area XI in Missoula were honored for their more than 15 years of service.



Montana Senior News owner **Jack Love** (center left) and reporter **Bernice Karnop** (center right) were honored for their more than a quarter century of publishing success and with editorial content tailored to the interests, activities, and needs of the 50+ age group, we are providing a critical link between our readers and our advertisers



Wally Daeley, (left center) of Lambert, Montana was recognized and honored for his tenure as the president of Montana's Silver Haired Legislator and his role as a Silver Haired Senator to the National Silver Haired Congress.

Wally passed away on the morning of May 23. He will be missed.

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### **New State Long Term Care Ombudsman**

We want to welcome Tom Sweely as the new State Long Term Care Ombudsman in the Senior and Long Term Care Division.



As the new State Ombudsman, I must first state that I am very glad to be here in the great state of Montana, and in a position that is so vital to maintaining a good quality of life for Montana's facility residents, and also for our aging population in general.

It is a new role for me, though before coming to Montana last November, I had spent the past 10 years in a similar advocacy role with Adult Protective Services in Texas. It was there that I learned and came to appreciate the role of advocacy.

So while I am new to Montana, I am in no way new to the world of advocacy.

Advocacy is work that I enjoy and find rewarding. Advocacy is a role that is not going away. It is a role that we all find ourselves in from time to time, officially or unofficially, and one day as we all age we may even find ourselves on the receiving end of the advocacy equation.

I am just starting out in my new role, but I am looking forward to a long and productive relationship with our aging community network and the population we all serve.